

U.S NATIONAL STAGE WORKSHEET (DO/EO)

10/522283

U.S. APPL. NO. _____

INTERNATIONAL APPL. _____

IB03/03286

APPLICATION FILED BY: 20 MOS., _____ OR 30 MOS., _____ SCREENED BY _____

PCT International Division

INTERNATIONAL APPLICATION PAPERS IN THE APPLICATION FILE:

- ☒ International application
- ☒ Article 19 amendments
- ☒ Priority Document(s) No. _____
- ☐ Request Form PCT/RO/101
- ☐ PCT/IB/302
- ☐ PCT/IB/304
- ☐ PCT/IB/306
- ☐ PCT/IB/308
- ☐ PCT/IB/331
- ☐ OTHER PCT/IB/ _____
- ☐ PCT/IPEA/409 also 416

- ☐ 409 annexes to IPER
- ☒ PCT/ISA/210 (Search report)
- ☐ Search report References
- ☐ Other Papers filed

WIPO PUBLICATION
PUBLICATION NO. WO 2004/02876
PUBLICATION DATE 12 Feb 04
PUBLICATION LANG., English
NOT PUBLISHED
U.S. only _____ Requested

RECEIVED FROM THE APPLICANT: (other than checked above)

- ☒ National application basic fee paid
- ☐ Express Processing Requested
- ☒ Translation of the International Application
- ☒ Used the IB copy of the IA
- ☒ Description
- ☒ Claims
- ☐ Drawings
- ☐ Foreign Language in drawing
- ☐ Article 19 Amendments
- ☐ Amendment used in application
- ☐ Article 34 Amendment
- ☐ Amendment used in application
- ☐ DNA
- ☐ 1194 transaction done

- ☒ Preliminary Amendment(s) filed 25 Jan 05
- ☐ second submission
- ☐ Information Disclosure Statement
- ☐ second submission
- ☒ Assignment
- ☐ Forward to Assignment Branch
- ☐ Substitute Specification
- ☐ Small Entity Statement
- ☐ type _____
- ☒ Oath/Declaration (date submitted _____)
- ☐ Not executed
- ☒ Executed
- ☐ Power of Attorney
- ☐ Change of Address

35 USC Receipt of Request (PTO - 1399 Transmittal Letter) _____

Date Acceptable oath/declaration received _____

102(e) Date _____

Date complete 35 USC 371 requirements met _____

DATE NOTICE COMPLETED

DO/EO 903 Notice of Acceptance _____

DO/EO 905 Notice of Missing Requirements _____

DO/EO 917 Notice of A defective oath or declaration _____

DO/EO 916 Notice of defective response _____

DO/EO 913 Notice of defective translation _____

DO/EO 909 Notification of Abandonment _____

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